

MAY 11 2005

FACSIMILE COVER SHEET

Deliver to: Jason J. Chung, USPTO Art Group: 2611
Facsimile No.: 703-872-9306 Date: May 11, 2005
From: William W. Schaal, Reg. No. 39,018
Our Docket No.: 80398P311 Number of pages 15 including this sheet.
Application No.: 09/729,811 Filing Date: 12/4/2000
Docket Due Date(s): 5/24/2005

Enclosed are the following documents:

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<input checked="" type="checkbox"/> Amendment: <u>Response</u> (<u>11</u> pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (<u> </u> pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: _____ (<u> </u> pgs) w/cover & abstract)	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet (<u> </u> pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of <u>Facsimile</u> _____	<input type="checkbox"/> Reply Brief (<u> </u> pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (<u> </u> pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: <u> </u> sheets, <u> </u> figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: _____	<input type="checkbox"/> Response to Written Opinion (<u> </u> pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (<u> </u> pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
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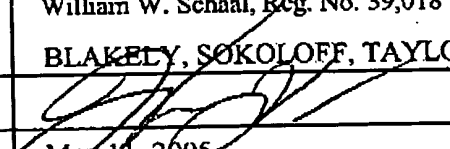
Susan McFarlane 5/11/2005
Susan McFarlane Date

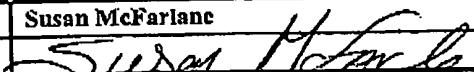
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/729,811
		Filing Date	December 4, 2000
		First Named Inventor	Brant Candelore
		Art Unit	2611
		Examiner Name	Jason J. Chung
Total Number of Pages In This Submission	14	Attorney Docket Number	80398P311

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	May 11, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
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Signature			

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/ 06/04/2004.
 SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	09/729,811
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	December 4, 2000
		First Named Inventor	Brant Candelore
TOTAL AMOUNT OF PAYMENT (\$) 0.00		Examiner Name	Jason J. Chung
		Art Unit	2611
		Attorney Docket No.	80398P311

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments


FEE CALCULATION
1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
37	37	0	\$0.00
4	4	0	\$0.00
Multiple Dependent			
Large Entity	Small Entity	Fee Description	
Fee Code (\$)	Fee Code (\$)		
1202 50	2202 25	Claims in excess of 20	
1201 200	2201 100	Independent claims in excess of 3	
1203 360	2203 180	Multiple Dependent claim, if not paid	
1204 300	2204 150	**Reissue independent claims over original patent	
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1)		(\$)	0.00

*for number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description		Fee Paid
Fee Code (\$)	Fee Code (\$)			
1051 130	2051 65	Surcharge - late filing fee or oath		
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet		
2053 130	2053 130	Non-English specification		
1251 120	2251 60	Extension for reply within first month		
1252 450	2252 225	Extension for reply within second month		
1253 1,020	2253 510	Extension for reply within third month		
1254 1,680	2254 795	Extension for reply within fourth month		
1255 2,160	2255 1,080	Extension for reply within fifth month		
1401 500	2401 250	Notice of Appeal		
1402 500	2402 250	Filing a brief in support of an appeal		
1403 1,000	2403 500	Request for oral hearing		
1451 1,510	2451 1,510	Petition to institute a public use proceeding		
1400 130	2400 130	Petitions to the Commissioner		
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)		
1006 180	1006 180	Submission of Information Disclosure Stmt		
1009 780	1009 395	Filing a submission after final rejection (37 CFR § 1.129(a))		
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))		
Other fee (specify)				
SUBTOTAL (2)		(\$)		

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	William W. Schaaf	Registration No. (Attorney/Agent)	39,018
Signature		Telephone	(714) 557-3800
		Date	05/11/05

Based on PTO/SA-17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004.
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FEE TRANSMITTAL for FY 2005 <i>Patent fees are subject to annual revision.</i>		Complete If Known	
		Application Number	09/729,811
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	December 4, 2000
		First Named Inventor	Brant Candelore
TOTAL AMOUNT OF PAYMENT (\$) 0.00		Examiner Name	Jason J. Chung
		Art Unit	2611
		Attorney Docket No.	80398P311

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION
1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
37	37	0	\$0.00
Independent Claims			
4	4	0	\$0.00
Multiple Dependent			
Large Entity	Small Entity	Fee Description	
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1202 50	2202 25	Claims in excess of 20	
1201 200	2201 100	Independent claims in excess of 3	
1203 360	2203 180	Multiple Dependent claim, if not paid	
1204 300	2204 150	**Reissue: independent claims over original patent	
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1)		(\$)	0.00

**or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
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1254 1,590	2254 795	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
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1403 1,000	2403 500	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
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1808 180	1808 180	Submission of Information Disclosure Stmt	
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)			
SUBTOTAL (2)		(\$)	

SUBMITTED BY

Name (Print/Type) William W. Scheel

Registration No. (Attorney/Agent)

39,018

Complete (if applicable)

Telephone

(714) 557-3800

Signature

Date

05/11/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 09/729,811
Amdt. Dated 05/11/2005
Reply to Office Action of February 24, 2005

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MAY 11 2005

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 09/729,811
Applicant : Brant Candelore et al.
Filed : 12/04/2000
TC/A.U. : 2611
Examiner : Jason J. Chung

Confirmation No. 9260

Docket No. : 808398P311
Customer No. : 8791

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of September 24, 2004 and filed concurrently with a Request for Continued Examination (RCE), please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.